



PANDEMIC INFLUENZA U•P•D•A•T•E



CDC Prepares

INSIDE CDC

April 2007

Fast Facts

The following facts were taken from the [American Public Health Association National Opinion Survey to Determine Levels of Preparedness for a Public Health Crisis](#). The survey was conducted between February 9-13, 2007, by Peter D. Hart Research Associates, Incorporated.

Most people are not prepared for a public health crisis - a majority acknowledge their lack of preparedness.

☐ 32 percent of the public have taken no special steps to prepare for an emergency situation such as a public health crisis. An additional 55 percent have taken some steps, but acknowledge they could do more.

Many people believe that they are more prepared than they actually are.

☐ More than one-quarter (27 percent) of the public claim to be prepared for a public health crisis, but only half of those (14 percent) actually have a three-day supply of food, water, and medication.

The term public health crisis does not resonate with people. However, the public is concerned about the events that might lead to one.

☐ Just 26 percent of the general public thinks it is likely that they or their family will be affected by a public health crisis in the next year or two, and only 27 percent believe that a public health crisis in the area that they live is likely in the next year or two.

[Complete poll results](#), along with a [self assessment preparedness tool](#) are available at the APHA Website.

If You Are Asked . . .

What progress is being made in developing an H5N1 vaccine?

The U.S. Food and Drug Administration (FDA) announced April 17, 2007, the first approval in the United States of a vaccine for humans against the H5N1 influenza virus, commonly known as avian or bird flu.

The vaccine could be used in the event the current H5N1 avian virus were to develop the capability to efficiently spread from human to human, resulting in the rapid spread of the disease across the globe.

Should such an influenza pandemic emerge, the vaccine may provide early limited protection in the months before a vaccine tailored to the pandemic strain of the virus could be developed and produced.

"The threat of an influenza pandemic is, at present, one of the most significant public health issues our nation and world faces," said Andrew C. von Eschenbach, M.D., Commissioner of Food and Drugs. "The approval of this vaccine is an important step forward in our protection against a pandemic."

While there have been no reported human cases of H5N1 infection in the United States, almost 300 people worldwide have been infected with this virus since 2003 and more than half of them have died. ([Full Story](#))

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Public Health Prepares

Indonesia Resumes Sharing H5N1 Avian Influenza Virus Samples Following WHO Meeting in Jakarta

The World Health Organization (WHO) welcomed the news from the Minister of Health of Indonesia, who announced at a joint news conference March 27 that the country would resume sharing of H5N1 avian influenza virus samples “immediately.” This commitment by the Government of Indonesia follows a two-day meeting organized by WHO in Jakarta.

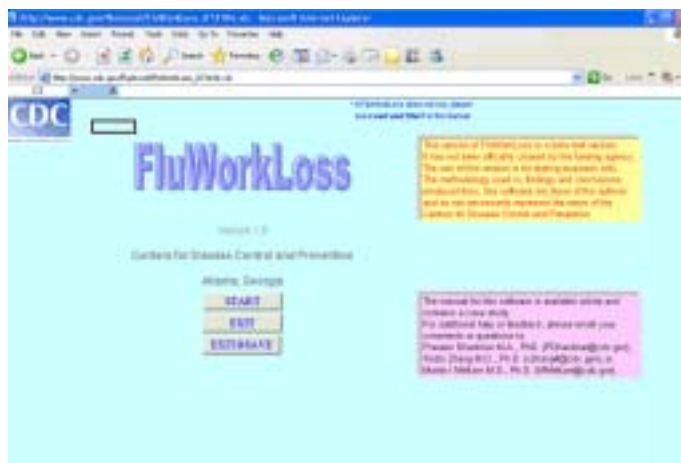
Indonesia’s Minister of Health, Siti Fadilah Supari, has focused global attention on the fact that developing countries have supplied H5N1 virus to WHO Collaborating Centres for analysis and preparation for vaccine production, but that the resulting vaccines produced by commercial companies are likely to be unavailable to developing countries such as Indonesia. She called this system “unfair.”

At the same time, withholding viruses from WHO Collaborating Centres poses a threat to global public health security and the ongoing risk assessment for influenza, conducted by WHO Collaborating Centres. ([Full Story](#))

CDC Recommends

Availability of FluWorkLoss 1.0 Software to Estimate Loss of Work Days During an Influenza Pandemic

Illness rates during an influenza pandemic are likely to be two to five times higher than during a typical influenza season. To maintain continuity of essential operations, public health officials, policy makers, healthcare facilities managers, and business leaders must plan for influenza-related work absences during an influenza pandemic. FluWorkLoss is a software program that allows estimation of the potential number of days lost from work because of an influenza pandemic.



Users can change nearly all input values, such as the number of work days assumed lost when a worker becomes ill or the number of work days lost because a worker stayed home to care for a family member. Users also can change the length and virulence of the pandemic model so that a range of possible effects can be estimated.

FluWorkLoss provides a range of estimates of total work days lost, and graphic illustrations of work days lost by week and percentage of total work days lost to influenza-related illnesses. ([Full Story and Link to Software](#))

Travel Industry Pandemic Influenza Planning Checklist Now Available

The U.S. Department of Health and Human Services and the Centers for Disease Control and Prevention have developed a checklist that identifies important steps that the travel industry can take now to prepare for an influenza pandemic. The checklist, which is available at the pandemicflu.gov Website, provides a general framework for developing a pandemic influenza plan.

Individual businesses will need to adapt this checklist to meet their unique needs and circumstances. Many of the activities in the checklist will also help travel-related businesses prepare for other kinds of emergencies. The key planning activities are meant to complement and enhance existing all-hazards emergency/

National Public Health Week

CDC joined the American Public Health Association and public health organizations throughout the United States in encouraging Americans to "Take the First Step" during National Public Health Week April 2-8.



**National Public
Health Week
April 2-8, 2007**

This year's theme, "Preparedness and Public Health

Threats: Addressing the Unique Needs of America's Vulnerable Populations," provided an excellent opportunity to showcase the important work CDC has accomplished in the preparedness arena, while helping the APHA and public health organizations throughout the United States prepare Americans for threats such as bioterrorism, natural disasters, and pandemic influenza.

The following forums are available for all employees online:

CDC Director, Dr. Julie Gerberding, and Chief Public Health Officer, Dr. Stephanie Bailey, helped kickoff the week by joining state and federal public health officials at the National Press Club for a preparedness roundtable, where they discussed lessons learned from local health emergencies. [View the six part series here.](#)

The Coordinating Office of Terrorism Preparedness and Emergency Response also hosted a live satellite broadcast entitled "[Pandemic Influenza: Progress in Planning and Exercising: Federal, State, and Local Perspectives](#)" to promote pandemic influenza preparedness and response capacity.

business contingency plans. For further information on general business emergency planning and continuity of operations, [Visit the pandemicflu.gov Website](http://pandemicflu.gov) for more information.

Update on H5N1

Animal Situation Update As of April 17:

During April, new outbreaks of influenza H5N1 among poultry were reported in Pakistan, Cambodia, Vietnam, and Myanmar. This is Cambodia's first report of H5N1 in poultry since August 2006. Control measures have been instituted in all four locations. [View the update on avian influenza in animals at the World Organization for Animal Health site.](#)

Human Situation Update: (As of April 17)

During April, the Egyptian Ministry of Health announced five new human H5N1 cases, one fatal: a 15-year-old girl from Cairo. The other four cases involved: a 2-year-old female who is in stable condition; a 4-year-old boy who developed symptoms on March 26 and was hospitalized on March 29; a 7-year-old boy who developed symptoms on March 26 and was hospitalized on March 29; a 4-year-old girl who developed symptoms on March 29 and was hospitalized on March 30. All four of these cases are receiving oseltamivir treatment and remain in stable condition. All cases had a history of contact with dead birds prior to illness onset. Contacts are under surveillance and all remain healthy. Of the 34 H5N1 cases reported to date in Egypt, 13 have been fatal.

The Cambodia Ministry of Health reported a new human H5N1 case (first case in 2007, seventh overall, all have been fatal) in a 13-year-old girl. Sick and dead poultry were present in the victim's village in recent weeks and the victim had consumed a sick chicken prior to illness onset. [Visit the WHO Website for the most recent human cases reports.](#)

Where to Find More

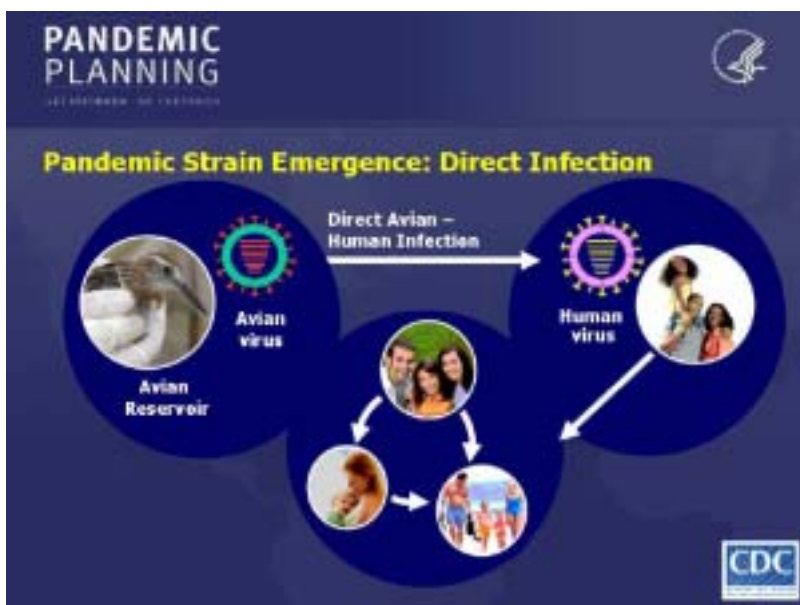
A source for information on pandemic influenza is the CDC's Hotline at: 1-800-CDC-INFO (1-800-232-4636). This line is available in English and Spanish, 24 hours a day, 7 days a week. TTY: 1-888-232-6348.

**Know What To Do
About Pandemic Flu**

USDA Animal Health
202-720-4623
USDA Report Sick Farm Birds
866-536-7593

USDA Meat and Poultry Hotline
888-MPHotline (888-674-6854)
TTY: 800-256-7072
English, Spanish
Online answers: [Ask Karen](#)

Military Service Members
800-497-6261



The picture on the left shows a mutation of an avian (bird) influenza virus. Such mutations can make viruses more easily transmissible from person to person.

The picture below illustrates re-assortment, which is the exchange of genetic material between human and bird viruses. Re-assortment can occur when pigs or humans are infected with both a bird and a human virus at the same time. This is called co-infection, and the exchange of genetic material (re-assortment) results in a new human virus.

Pandemic Influenza Update: Reader's Feedback

The monthly Pandemic Influenza Update is prepared by CDC's Priority Communication System and is intended for INTERNAL USE ONLY. Information in this newsletter is time sensitive and evolving. Readers are welcome to comment by email to: panupdate@cdc.gov

